IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

Manasseh et al.

Serial No.:

10/506,368

For:

METHOD AND APPARATUS FOR TRAVELER INTERACTIONS

MANAGEMENT

Filed:

January 21, 2005

Examiner:

Kent Wang

Art Unit:

2622

Confirmation No.:

1079

Customer No.:

27,623

Attorney Docket No.: 0004800USU/2279

Mail Stop RCE **COMMISSIONER FOR PATENTS** P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

AMENDMENT TRANSMITTAL

We are enclosing an Amendment accompanied by an RCE in response to the Final Office Action dated September 17, 2008 in the above-identified application.

	Petition for extension of time pursuant to 37 C.F.R. §§ 1.136 and 1.137 is hereby
made	if, and to the extent, required. The fee for this extension of time is calculated to
be \$_	to extend the time for filing this response until

The fee for any change in number of claims has been calculated as shown below.

		C	LAIMS AS AM	ENDED		
	Claims Remaining After Amendment		Highest Number Previously Paid	Extra	Rate	
Total Claims	59	Minus	54	5	x \$52.00	\$260.00
Independent Claims	3	Minus	5		x \$220.00	\$0
MULTIPLE DEPENDENT CLAIM FEE						x \$370.00 = \$
TOTAL FEE FOR CLAIM CHANGES						\$260.00
1/2 FILING FEE FOR SMALL ENTITY						\$N/A

	otal fee for this amendment, incl and RCE fee is calculated to be	uding claim changes (\$260.00), any extension of \$1070.00.
	A check in the amount of \$	is attached.
comm	onal fees under 37 C.F.R. §§1.1 nunication or during the entire pe ayment, to Deposit Account N	nuthorized to charge the fee of \$1070.00, any 16 and 1.17 which may be required with this endency of the application, or credit any o. 01-0467. A duplicate copy of this Form is Pamela L. Wingood Attorney for Applicant(s) Registration No. 54,903 Ohlandt, Greeley, Ruggiero & Perle, L.L.P.
٠,		One Landmark Square, 10 th Floor Stamford, CT 06901-2682 Telephone: (203) 327-4500 Telefax: (203) 327-6401

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		C	LAIMS AS	SAMENI	DED	_	
	Claims Remaining After Amendment		Nui Prev	hest mber iously aid	Present Extra	Rate	
Total Claims	59	Minus	54		5	x \$52.00	\$260.00
Independent Claims	3	Minus	5			x \$220.00	\$0
MULTIPLE DEPENDENT CLAIM FEE			Ī			x \$370.00 = \$	
TOTAL FEE FOR CLAIM CHANGES						\$260.00	
1/2 FILING FEE FOR SMALL ENTITY			l			\$N/A	

	for this amendment, inc fee is calculated to be	luding claim changes (\$260.00), any extension \$ <u>1070.00</u> .
A chec	k in the amount of \$	is attached.
additional fee	s under 37 C.F.R. §§1. on or during the entire p	authorized to charge the fee of \$1070.00, any 16 and 1.17 which may be required with this endency of the application, or credit any 10. 01-0467. A duplicate copy of this Form is
enclosed.		Samuel III was and
Date	nber 17, 2008	Pamela L. Wingood Attorney for Applicant(s) Registration No. 54,903 Ohlandt, Greeley, Ruggiero & Perle, L.L.P One Landmark Square, 10 th Floor Stamford, CT 06901-2682 Telephone: (203) 327-4500
		Telefax: (203) 327-6401

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